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IMPORTANT NOTICE
TELECOPY/FACSIMILE COVER LETTER

TO: U.S. Patent and Trademark Office
Examiner: Yehdega Retta
Art Unit: 3622

DATE: May 23, 2005

FROM: Darius G. Adli

TIME: _____

TOTAL NO. OF PAGES, INCLUDING COVER: 13

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MESSAGE:

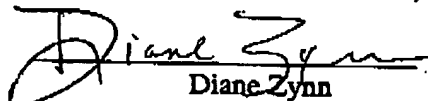
Patent Application No.: 09/818,125; Our Ref. 81747.0191

I hereby certify that the following documents:

- ☒ Amendment Transmittal Letter
- ☒ Amendment Under 37 C.F.R. § 1.116

are being facsimiled to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450., for filing in the above-identified application.

May 23, 2005
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Diane Zynn

TELECOPY/FAX NUMBER: 703-872-9306 ART UNIT 3622

CLIENT NUMBER: 81747.0191

ATTORNEY BILLING NUMBER: 5214

CONFIRMATION NUMBER: (571)272-6728 (return fax to Diane Zynn)

FORM PTO-1083

Patent Application No. 09/818,125
Attorney Docket No. 81747.0191

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Masahiro MINOWA

Serial No: 09/818,125

Confirmation No.: 8629

Filed: March 26, 2001

For: METHOD, COMPUTER PRODUCT AND NETWORK
SYSTEM FOR RECEIVING AND PLACEMENT
PROCESSING OF ADVERTISING INFORMATION

Art Unit: 2626

Examiner: Mark E. Wallerson

I hereby certify that this correspondence
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P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	23	-	23	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	3	-	3	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claims: 1, 16, 23					TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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- ☐ Please charge the fee of \$___ for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☐ Please charge the fee of \$___ for the ___ extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:

Darius G. Adli

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Date: May 23, 2005

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Appl. No. 09/818,125
Amdt. Dated May 23, 2005
Reply to Office Action of March 22, 2005

Attorney Docket No. 81747.0191
Customer No. 26021

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MAY 23 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Masahiro MINOWA
Serial No.: 09/818,125
Confirmation No.: 8629
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AND NETWORK SYSTEM FOR
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Examiner: Yehdega Retta

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Alexandria, VA 22313-1450
May 23, 2005
Date of Deposit
Diane Zynn
Name
Signature Date 05/23/05

AMENDMENT UNDER 37 C.F.R. § 1.116

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action dated March 22, 2005, please amend
the above-referenced application as follows:

Amendments to the Claims are reflected in the listing of claims which
begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.